REMARKS

This Application was filed with 28 claims. Claims 1-24 have been rejected. Claims 25-28 were not addressed in the Office Action. Claims 1-4, 6-8, 11, 13, 15, 18, 21, and 23 have been amended, Claim 20 has been canceled, and Claims 29-31 have been added. Therefore, Claims 1-19 and 21-31 are pending in the Application. Reconsideration of the Application based on the remaining claims as amended and arguments submitted below is respectfully requested.

Claim Rejections - 35 U.S.C. § 103

Claims 1-24 have been rejected under 35 U.S.C. § 103 (a) as being unpatentable over Goetz et al. (U.S. Pat. No. 6,421,650) in view of Hacker (U.S. Pat. No. 6,988,075).

Claim 1

Claim 1 has been amended to include some of the inventive features of Claim 3. Specifically, Claim 1 includes the steps of "identifying at least one disease the patient may have based on the medication specific data" and "generating one or more disease/drug contra-indications based upon relationships between the at least one disease and the medication specific data." The Office Action states, in reference to the features of Claim 3 now incorporated into Amended Claim 1, that "[t]he

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Examiner has interpreted disease contra-indications as the inadvisability of prescribing a medication due to severe side effects, duplicative medications from the same therapeutic class, and drug-drug interactions." *See* Office Action, page 4.

Applicant asserts that the Office Action's interpretation of disease/drug contra-indications does not comport with the Application. Namely, when describing disease/drug contra-indications, the Application states

> the patient medication information [is compared] to the information in the First DataBank to identify all possible diseases the patient may have based upon the patients medication regimen and compares these possible diseases that a patient may have to the First DataBank information detailing any diseases which should not be treated with the medication that the patient is using. Stated another way, certain medications and diseases should not be mixed. In certain cases, some medications may worsen disease symptoms. Thus, the patient's medication history may be compared to the disease contra indications of the medication profile to alert the potential problems of the distribution of certain medications to a patient. If a disease is indicated, then the potential severity of the reaction that could be received when a person having that disease takes a medication is identified. Information regarding the disease contra indications severity, and contra indicated medication index are entered into the medication profile. *See* Application, ¶ 42.

Thus, disease/drug contraindications concern the relationship between certain diseases and certain medications. As such, the interpretation of disease/drug contraindications offered by the Office Action does not coalesce with that given in the Application.

Additionally, the term disease/drug contraindications is not interchangeable or coextensive with drug side effects, duplicative medications, and/or drug-drug interactions—contrary to the Office Action's contention. This stance is bolstered by the fact that the Application often refers to, and distinguishes between, side effects, drug-drug interactions, duplicative medications, and disease/drug contraindications. *See* Application, ¶¶ 8, 18, 28, 36. As evident by the Application's treatment of these terms, i.e. the careful distinction between and reference to them, the Office Action's interpretation of disease/drug contraindications is flawed. Moreover, a careful examination of Goetz reveals that Goetz is devoid of information pertaining to disease/drug contraindications, as described in the Application. Accordingly, the Applicant respectfully requests that the rejection to Claim 1 be withdrawn.

Claims 2-7 are dependent back to patentability distinct Amended Claim 1, and include features not disclosed in the prior art. As such, Applicant respectfully submits that Claims 2-7 are patentable.

Claim 8

Applicant has amended Claim 8 to more clearly articulate several of the claimed inventive features. Specifically, Claim 8 has been amended, in part, to state "comparing the patient's medication information to a drug-drug interaction database to identify severe, moderate, and mild drug-drug interactions" and

"compiling in the data system the identified severe and moderate drug-drug interactions, wherein the identified mild drug-drug interactions are suppressed." *See* Application, ¶ 44.

Goetz explicitly teaches that all drug-drug interactions should be displayed, both to a third party user, such as a healthcare provider, and the patient. Specifically, Goetz states

> Similarly, a check of potential interactions and cautions concerning a particular prescription is performed in the pharmacist component 106. If an interaction is detected by the physician or pharmacist software, it warns the pharmacist or physician of the severity of the interaction. The interaction check in the pharmacist's computer and in the physician's component 102 serves a watchdog function only. The pharmacist or physician have the ability to override the software warning and prescribe the drug anyway. This is routinely done by physicians today for minor potential interactions when substitute drugs are either unavailable or would cause even more severe interactions. In either case, the interaction is flagged in the patient component 104 such that the patient can review the interaction warning thus alerting the patient that there is an interaction potential between two drugs. The patient is then able to read about the interaction, usually in a brief form, and consult the physician or pharmacist for more information if clarifications are needed. *See* U.S. Pat. No 6,421,650, Col. 12, lines 1-19.

As such, Goetz advocates that drug-drug interactions, regardless of severity, should be displayed. This is contrary to Amended Claim 8.

Amended Claim 8 also contains features directed toward disease/drug contraindications. For the same reasons presented in the discussion of Amended Claim 1 above, Goetz does not teach or suggest these features. Accordingly, the Applicant respectfully requests that the rejection to Claim 8 be withdrawn.

Claims 9-14 and 29 are dependent back to patentability distinct Amended Claim 8, and include features not disclosed in the prior art. As such, Applicant respectfully submits that Claims 9-14 and 29 are patentable.

Claim 15

Step (b) of Claim 15 has been amended as follows: comparing the patient medication information to a database to identify profile information, wherein the profile information excludes mild drug-drug interactions." Excluding mild drug-drug interactions from the profile information is not taught or suggested by Goetz. Moreover, as shown in the arguments proffered in regard to Amended Claim 8, Goetz discloses that drug-drug interactions of all severities should be displayed to the user. *See* '650, Col. 12, lines 1-19. Accordingly, the Applicant respectfully requests that the rejection to Claim 15 be withdrawn.

Claims 16-17 and 30 are dependent back to patentability distinct Amended Claim 15, and include features not disclosed in the prior art. As such, Applicant respectfully submits that Claims 16-17 and 30 are patentable.

Claim 18

Claim 18 has been amended to include the steps of "accessing a database containing medication specific characteristics including medication side effects; comparing the patient medication information and the medication specific characteristics" and "generating profile information, wherein the profile information excludes the medication side effects that are mild." *See* Application, ¶ 40. A detailed review of Goetz shows that excluding side effects of medication, that are classified as mild, from patient profile information is not taught or suggested. Accordingly, the Applicant respectfully requests that the rejection to Claim 18 be withdrawn.

Claims 19, 21, and 22 are dependent back to patentability distinct Amended Claim 18, and include features not disclosed in the prior art. As such, Applicant respectfully submits that Claims 19, 21, and 22 are patentable.

Claim 23

Amended Claim 23 features a patient profile database having a plurality of patient profiles including "consequential information including identification of any drug-drug interactions of the prescribed medications, wherein the any identified drug-drug interactions having a severity classification of less than moderate are suppressed." The same arguments presented in the discussion of Amended Claim 8

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regarding drug-drug interactions are also applicable to Amended Claim 23. Accordingly, the Applicant respectfully requests that the rejection to Claim 23 be withdrawn.

Claims 24-28 and 31 are dependent back to patentability distinct Amended Claim 23, and include features not disclosed in the prior art. As such, Applicant respectfully submits that Claims 24-28 and 31 are patentable.

Applicant has commented on some of the distinctions between the cited references and the claims to facilitate a better understanding of the present invention. This discussion is not exhaustive of the facets of the invention, and Applicant hereby reserves the right to present additional distinctions as appropriate. Furthermore, while these remarks may employ shortened, more specific, or variant descriptions of some of the claim language, Applicant respectfully notes that these remarks are not to be used to create implied limitations in the claims and only the actual wording of the claims should be considered against these references.

Respectfully submitted,

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